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#### **FACSIMILE COVER SHEET**

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AUG 0 7 2006

Application No.: 10/750,053  Doc Enclosed are the following documents:	Art Group:1756  Date: Angust 7, 2006  er of pages21including this sheet.  Filing Date: 12/30/2003  ket Due Date(s): 8/6/2006				
Amendment:Response (_13_pgs)	e Fee Transmittal ide of Appeal ition for:  juest for Continued Examination (RCE) by Brief (pgs) juest & Certification Under 35 USC 122(b)(2)(B)(i) juest to Rescind Previous Nonpublication Request sponse to Notice of Missing Parts & Formalities Letter sponse to Written Opinion (pgs) minal Disclaimer insmittal of Publication Fee Due insmittal Letter				
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PAGE 1/21 \* RCVD AT 8/7/2006 5:41:57 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-2/9 \* DNIS:2738300 \* CSID:303 740 6962 \* DURATION (mm-ss):05-42

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## AUG 0 7 2006

TRANSMITTAL FORM (to be used for all correspondence after Initial filing)		Application No.	10/750,053			
		Filing Date	December 30, 2003			
		First Named Inventor	Rex K. Frost			
		Art Unit	1756			
i		Examiner Name	Kathleen Duda			
Total Number of Pages in This Submission	on 21	Attorney Docket Number	42P17297			
ENCLO	TUDES (-bos	k all that apply)				
ENCLOS	OUKES (CHEC	кан им арруу)	After Allowance Communication			
Fee Transmittal Form	Drawing(s)		After Allowance Communication to TC			
Fee Attached	Licensing	related Papers	Appeal Communication to Board of Appeals and Interferences			
Amendment / Response	Petition		Appeal Communication to TC (Appeal Notice, Brist, Raphy Brist)			
After Final Affidavits/declaration(s)	Petition to Convert a Provisional Application		Proprietary Information			
Extension of Time Request	Power of Attorney, Revocation Change of Correspondence Address		Status Letter			
Express Abandonment Request	Terminal Disclaimer		Other Enclosure(s) (please identify below):			
Information Disclosure Statement	Request for Refund		Facsimile Transmittal Sheet			
PTO/SB/08	CD, Numb	er of CD(s)				
Certified Copy of Priority Document(s)	Lands	scape Table on CD				
Response to Missing Parts/ Incomplete Application Remarks						
Basic Filling Fee  Declaration/POA		<b></b> _	:			
Response to Missing Parts under 37 CFR 1.52 or 1.53						
	E OE APRI ICA	NT ATTORNEY OR AG	ENT			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm Brent E. Vecchia, Reg. No. 48,011						
Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP						
Signature Front & Veelle						
Date August 7, 2006						
	CERTIFICATE OF MAILING/TRANSMISSION					
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Typed or printed name Pat Sullivan						
Signature	Pax 3	ultivaer 1	Date August 7, 2006			

Based on PTC/SB/21 (09-04) as modified by Blakely, Solokoff, Taylor & Zafman (wir) 11/30/2005. SEND TO: Commissioner for Patentle, P.O. Box 1450, Alexandria, VA 22313-1480

#### AUG 0 7 2006

FEE TO A NOMITTAL		Complete if K					
FEE TRANSMITTAL	Application Number						
for FY 2005	Filing Date		r 30, 2003				
Patent fees are subject to annual revision.	First Named Invento	24425		· · · · · · · · · · · · · · · · · · ·			
Applicant claims small entity status. See 37 CFR 1.27.	Examiner Name	Kathleen	Duda				
	Art Unit	1756					
TOTAL AMOUNT OF PAYMENT (\$) 300.00	Altomey Docket No.	42P17297					
METHOD OF PAYMENT (check all that apply)							
☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ C	ther (please identi	fy):					
Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP							
For the above-identified deposit account, the Director is h	ereby authorized to	o: (check all that	apply)				
Charge fee(s) indicated below	☐ Charge fe	e(s) indicated bel	ow, except f	or the filing fee			
Charge any additional fee(s) or underpayment of fee(	(s) 🛛 Credit an	y overpayments					
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.		_					
FEE CALCULATION							
1. EXTRA CLAIM FEES Before							
Claims below Fee Paid							
Total Claims 31 . 31° = 0 x 50.00 ° \$0.00	•						
Independent 4 4 0 x 200,00 = \$0.00							
Muliple Dependent							
Large Entity Small Entity							
Fee Fee Fee Fee <u>Fee Description</u> Canta (5) Code (5)							
1202 50 2202 25 Claims in excess of 20							
1201 200 2201 100 Independent claims in excess of 3 1203 360 2203 180 Multiple Dependent claim, if not paid							
1204 790 2204 395 "Reissue Independent claims over original patent 1205 300 2205 150 "Reissue claims in excess of 20 and over original patent	lent Tori	number previously paid, if g	poder, For Reissu	es, s <del>ee</del> below			
SUBTOTAL (1) (\$) 0.00				·			
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2. ADDITIONAL FEES Large Entity Small Entity							
Fee Fee Fee Code (5)   Code (5)   Fee Description		Fo	e Paid				
1051 130 2051 66 Suncharge - late liting lee or O8th							
1052 50 2052 25 Surcharge - lete provisional filling fee or cover shee	t.						
2053 130 2053 130 Non-English specification 1251 120 2251 60 Extension for raply within first month		<del> </del>	120.00				
1252 450 2252 225 Extension for raply within second month							
1253 1,020 2253 510 Extension for raply within third month		<u> </u>		•			
1254 1.590 2254 755 Extension for raply within faurth month 1255 2,160 2255 1.080 Extension for raply within fifth month							
1401 500 2401 250 Nouce of Appeal 1402 500 2402 250 Filing a brief in support of an appeal		<del></del>					
1403 1,000 2403 500 Request for oral hearing							
1451 1,510 2451 1,510 Petitlon to institute a public use proceeding 1460 130 2460 130 Petitlons to the Commissioner		-					
1807 60 1807 60 Processing fee under 37 CFR 1.17(q)			180.00				
1906 180 1806 180 Submission of Information Disclosure Sum 1909 790 1809 395 Filing a submission after linst rejection (37 CFR § 1	1.129(a))	-	100.00				
1810 790 2810 395 For each additional invention to be examined (37 CFR § 1.129(b))							
Other fee (specify)							
SUBTOTAL (2) (5) 300.00							
SUBMITTED BY Complete (if applicable)							
Name (Print/Type) Brent E. Vecchia	Registration No. (Attorney/Agent)	48,011	Telephone	(303) 740-1980			
Signature Report & Verlain	<u> </u>		Date	08/07/06			